

BEST AVAILABLE COPY

CLAIMS ONLY						Application Number	Filing Date				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments				
	Indep	Depend	Indep	Depend	Indep	Depend	*	Indep	Depend	Indep	Depend
1	1						51				
2		1					52				
3							53				
4		1					54				
5							55				
6							56				
7							57				
8							58				
9							59				
10							60				
11							61				
12							62				
13							63				
14							64				
15							65				
16							66				
17							67				
18							68				
19							69				
20							70				
21	1	1					71				
22		1					72				
23	1						73				
24							74				
25							75				
26							76				
27							77				
28							78				
29							79				
30							80				
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37							87				
38							88				
39							89				
40							90				
41							91				
42							92				
43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
Total Indep	3						Total Indep				
Total Depend	4						Total Depend				
Total Claims	7						Total Claims				